

STATES OF JERSEY



THE LONG-TERM CARE SCHEME (S.R.4/2018): JOINT RESPONSE OF THE MINISTERS FOR HEALTH AND SOCIAL SERVICES AND SOCIAL SECURITY

**Presented to the States on 25th June 2018
by the Minister for Health and Social Services**

STATES GREFFE

**THE LONG-TERM CARE SCHEME (S.R.4/2018): JOINT RESPONSE OF
THE MINISTERS FOR HEALTH AND SOCIAL SERVICES AND
SOCIAL SECURITY**

Ministerial Response to: S.R.4/2018

Ministerial Response required by: 26th June 2018

Review title: The Long-Term Care Scheme

Scrutiny Panel: Health and Social Security

INTRODUCTION

This is a joint response prepared by the Minister for Health and Social Services and the Minister for Social Security.

FINDINGS

	Findings	Comments
1	The Panel's adviser considers that the Long-Term Care Scheme is a good system and is amongst the best internationally in terms of the balance of responsibility between the States of Jersey and individuals.	Agreed. We welcome the very positive statement about the LTC scheme made by the Panel's adviser. We agree that this system affords a fair and equitable approach to identifying need and establishing a funding mechanism for a care package.
2	1,177 individuals are being supported through the LTC Scheme. Overall there are twice as many women on the Scheme as there are men.	Agreed.
3	There is no link between contributions and benefits because only those that pay income tax will contribute to the LTC Fund. Some will receive the benefit but not necessarily have contributed to it whilst others will contribute for a long period but will never need to claim from it.	Agreed. The LTC Fund is designed to work like an insurance scheme. Everyone who can afford to pay into the scheme does, so that people who have high care costs can get help from the scheme.
4	The LTC Scheme is complex and not easy to understand. A number of submissions made to the Panel complained about this.	The LTC scheme is designed to support claimants in a number of ways, so that different types of claimant can receive appropriate support. This provides flexibility to the scheme and ensures that, as far as possible, the needs and circumstances of individual claimants can be taken into account. See actions 1 and 2.

	Findings	Comments
5	Under the LTC Scheme, individuals are able to apply for a property loan. This has been welcomed by some who feel pleased that this option is available to prevent the necessity to sell their property to pay for care.	Agreed.
6	The LTC property loan is a long process and, for claimants residing in a care home, sometimes results in a period of uncertainty for either the individual or the care home.	Not agreed. The new Social Security Hypothec (Jersey) Law 2014 (as amended by L.5/2018) provides a simple and easy route to register a charge against property for LTC purposes. 106 home-owners have used this facility so far, and no longer face the worry that they will need to sell their home to meet their care costs.
7	Once an assessment of need has been carried out by social workers through a Resource Allocation System, the claim is then processed by the Social Security Department. There are a number of factors that contribute to the application process and there is a 3 week time limitation set on the return of the form in which time clients are required to collect supporting evidence. If there is a breakdown in any of these processes it can result in a delay.	The process of gathering all necessary evidence can take time, which is acknowledged, and as such there is no set cut-off for completing applications. Once the application is received and reviewed, if there is a need for extra details to be provided, the customer has 28 days to supply the additional information. The LTC Law allows claims to be backdated up to 6 months if there is a valid reason for the delay.
8	The flexible care component has been introduced to provide financial support to individuals who have care needs below the level at which they would qualify for the LTC Scheme. Although the flexible care component is part of the Income Support system, the assessment process is undertaken under the LTC mechanism thereby creating a two-tier system.	The flexible care component provides an extra level of support for someone living in a low-income household who needs a formal care package, but has care needs below the level to qualify for the LTC scheme itself. It uses the same assessment as LTC, as this assessment is based around creating an appropriate care package for the person. The Income Support scheme uses a range of different assessment methods to provide extra support for low-income claimants who have a health condition that means they need more help with their personal care, mobility or clinical costs.
9	The LTC Scheme does not cover all care needs. Those who have assessed long-term care needs which fall above the qualifying level for the LTC Scheme are part-funded by the Health and Social Services Department. Those who have long-term care needs which fall below the qualifying level for the	The LTC scheme was set up to create a ring-fenced fund that could be used to support the increasing cost of long-term care in Jersey, driven by a significant increase in the older population. As a benefit scheme, it includes a maximum level of weekly benefit with the Health and Social Services Department (“HSS”) supporting

	Findings	Comments
	LTC Scheme are funded by the flexible care component of Income Support. The different systems create uncertainty over the sustainability of funding-streams.	<p>the small minority of individuals whose care needs exceed this. Whilst this cost is likely to grow in future, it represents a small proportion of the total HSS budget and can easily be incorporated into the global figure.</p> <p>The flexible care component is designed to deal with a small minority of low-income claimants who have a specific type of care need that falls outside the current Income Support system. Again this represents a very small proportion of the total Income Support budget, and this cost is considered to be fully sustainable.</p>
10	When the LTC Scheme was first implemented, individuals who applied to join the Scheme experienced delays getting assessed and consequently receiving appropriate care packages. The Panel understands that the system has now improved in terms of waiting times.	<p>It is acknowledged that there were delays when the benefit was first introduced. Significant improvements in all aspects of processing have been achieved since then.</p> <p>HSS aims to see everyone in 5 working days, and the longest wait at present is 2 weeks.</p> <p>LTC claims are now consistently handled by Social Security within a service level agreement (“SLA”) of 15 working days.</p>
11	The turnover of social workers has meant that clients (and families) have been unable to build close working relationships with their social workers, which has contributed to a lack of continuity within the service.	Adult social services have had a consistent workforce over this period. There were additional temporary staff employed between January 2015 and June 2017 to assist with the increase in demand at the start of the new scheme.
12	A group of carers are receiving respite care which continues to be funded by the Health Department. However, it is possible for people to access the LTC Scheme purely to receive funding for respite, although some carers will need to pay for care whilst respite is provided to them. This differs from the previous arrangements where all respite was provided at no charge to carers.	<p>The LTC scheme has been progressively rolled out to ongoing HSS clients. This phased timetable has helped to ensure continuity of care and to allow families to adapt to the new system. It is expected that these arrangements will be completed by the end of 2018.</p> <p>The LTC scheme provides a consistent level of support to all adults aged 18 and above who have long-term care needs, and incorporates support for respite care, as well as paid-for care across all adult age ranges.</p>
13	The LTC General Information Leaflet offers no explanation on the options for respite care.	<p>It is acknowledged that the original leaflet omitted to include information on respite care. The new customer communications will include this information. Individual claimants are always advised on their options for respite from their HSS care co-ordinator or LTC adviser.</p> <p>See actions 1 and 11.</p>

	Findings	Comments
14	Access to respite care through the LTC Scheme is a fundamental issue. Some people struggle to gain access to respite, particularly when urgent or unplanned. Present arrangements do not meet needs in many cases, which risks the provision of care within families.	<p>The LTC scheme is a funding scheme which provides financial support for care and respite costs. It is designed to work in a care market with a range of providers offering residential and domiciliary care services.</p> <p>The market has increased since the introduction of the LTC scheme, and is likely to continue in response to increasing demand.</p> <p>The issue identified by the Panel is likely to be an issue in regard to the availability of appropriate services, rather than the assessment of need or availability of financial support.</p>
15	Carers make a significant contribution to society by providing unpaid care and support to their loved ones. The pressure on many carers is often high and the impact on their lives is significant, thereby highlighting the importance of sufficient respite provision.	Agreed.
16	The implementation of the Regulation of Care Law and the establishment of the Jersey Care Commission are to be welcomed. In hindsight, the Law and its Regulations should have been implemented at the same time as the LTC Scheme, which would have ensured that care providers were regulated to provide appropriate standards of care.	The LTC Law was approved in 2011 and the scheme was operational 3 years later in 2014. Existing legislation at that time ensured that all residential care homes were subject to appropriate regulation and inspection. In the absence of the new Regulation of Care (Jersey) Law 2014 (the “RoC Law”), HSS created the Approved Provider Framework in 2014 to ensure high standards of care within the domiciliary sector. This has worked well over the last 4 years. Those parts of the RoC Law not yet in force are due to come into force towards the end of 2018.
17	The LTC Scheme caters for young adults with long-term conditions, as well as older-aged adults with chronic long-term conditions. At present the Scheme fails to provide sufficient personalised care to the individual. The Scheme must be personalised to the individual so that their health and social care needs are met. A young adult may need their LTC benefit to use for more social-related activities, compared to an older adult who may need their benefit for more health-related care needs.	The assessment of care needs used in the LTC scheme is appropriate to adults of all ages, and takes full account of their care needs associated with physical, mental and cognitive issues and the need for social participation. For adults receiving care in their own home, a personal budget is set, reflecting these total needs.

	Findings	Comments
18	Les Amis have raised concerns about the sustainability of their service due to a deflator added for group homes.	Les Amis operates a number of group homes which each cater for a small number of clients (up to 5). In some homes there are 2 clients who both have very high care needs and are receiving extra funding from HSS, as their care packages exceed the maximum payable through the LTC scheme. The deflator is used by HSS to acknowledge the reduced cost of providing care to 2 people at the same time. For example, if a client's needs are such that they require a member of staff to be awake throughout the night, and there are 2 clients with the same need, this cover can be provided by a single member of staff, and the overall cost of the package is reduced accordingly. This is the same arrangement for all small group homes regardless of provider.
19	Once an individual has applied for the LTC Scheme, if they are receiving Income Support, the personal care component is no longer payable. Instead only a small amount for personal expenditure is payable under the LTC Scheme. Therefore individuals no longer have the flexibility to spend the sum of money they receive as the personal care component on living in the community, if their families are the ones providing most of the care.	<p>If an individual who is receiving Income Support moves into a care home, they no longer need to maintain an Income Support claim, as the LTC scheme covers both care and living costs in a care home. In this case, the individual is allocated a weekly personal allowance to meet the cost of personal spending.</p> <p>If an individual who is receiving Income Support receives an LTC package in their own home, the Income Support claim will continue, with the individual receiving adult and accommodation components as normal. A claimant will not receive the personal care element of Income Support and an LTC benefit at the same time, as these are both designed to meet the care costs of the individual.</p>
20	The assessment to find out if an individual is eligible to receive the personal care component of Income Support is undertaken differently and based on different criteria compared to the LTC assessment. Therefore, in some cases it may be more appropriate for an individual to receive the LTC benefit rather than the personal care component of Income Support.	A claimant can choose to receive support through the Income Support scheme, or through the LTC scheme if their care needs meet the minimum level required for the LTC scheme.
21	There is a risk that vulnerable adults will not receive the care they need because within their families a decision is made not to apply for the LTC benefit, choosing instead to retain a	<p>The HSS care co-ordinator and the LTC adviser are always available to provide advice to families on the choices available to them in respect of the different benefits.</p> <p>In some cases, it may be necessary to complete</p>

	Findings	Comments
	personal care component of Income Support which they consider essential to provide for the needs of that adult living in the community.	a 'best interest decision' to ensure that where a decision is taken by the person's family, that this does not impact upon the life opportunities and options available for that person.
22	Although in 2013 the Minister for Social Security agreed to report annually on certain key statistical information, this has not happened. Collection and reporting of this information is important in considering assumptions in any future modelling of projected costs.	Summary LTC information has been included in the Social Security Department's Annual Report each year since 2014. Further information will be provided in future, following the implementation of a new IT system.
23	The financial demands on the LTC Fund are likely to increase if the next generation of older adults requiring care has fewer assets than the current generation.	It is clear from demographic trends that the number of people needing care will rise rapidly over the next 20 years. This will place pressure on the LTC Fund. This pressure would be exacerbated if the level of assets of new claimants was lower than today. It is too soon to predict the impact of any such change, but this will be carefully monitored over coming years.
24	The contribution rate to the LTC Fund will need to increase steadily over the next 2 decades to ensure that the Fund can sustain the expected increase in benefit expenditure caused by the ageing demographic.	Agreed.

RECOMMENDATIONS

	Recommendations	To	Accept/Reject	Comments	Target date of action/ completion
1	The Social Security Department should review its explanatory literature and streamline the information provided in the "LTC General Information" leaflet with a view to explaining the Scheme more clearly. This should be undertaken by Q3 2018.	SS	Accepted by HSS and SS	A new leaflet will be available before the end of June. Additional material will be prepared during 2018.	June 2018

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
2	The Minister for Social Security should consider whether there are aspects of the LTC Scheme which could be simplified for the benefit of both claimants and administrators. The Social Security Department should review these processes and make the necessary changes and report back to the States by Q3 2018.	SS	Partially accepted by SS and HSS	<p>The underlying structure of the LTC scheme has been designed to cater for a range of claimants and their different circumstances. Simplifying the structure would remove flexibility from the scheme and would provide fewer choices to future claimants.</p> <p>Both SS and HSS use process design methods (Lean, RPIW) to ensure that administrative processes are simple and efficient. These methods have already been used to simplify aspects of the application process, and this work will continue.</p>	Ongoing
3	The Social Security Department should set up an online facility so that information could be filled in by the applicant in order to speed up the application process. This should be established before the end of 2018.	SS	Accepted by SS but with an extended timescale	<p>The Social Security Department is committed to providing online facilities across all the benefits that it provides wherever this is practicable, and it is anticipated that this service will go online in the future as part of the new Customer and Local Services Department.</p> <p>However, compared to other benefits offered by the SS, the LTC scheme is a relatively low-volume benefit, and online services are being prioritised according to the number of customers who access them.</p> <p>The LTC scheme receives up to 10 applications a week, and this low volume of transactions would give it a lower priority for online access compared to other higher volume processes.</p> <p>The other factor to be taken into consideration is the feedback from customers, who have said that they find an initial face-to-face meeting (screening process) with an LTC adviser beneficial, as it guides them to the appropriate aspect of LTC according to their circumstances.</p>	End of 2019

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
4	Family members should be involved to a greater extent in providing information relevant to a claimant's assessment.	HSS /SS	Accepted by HSS and SS	<p>This is an integral part of the current assessment process. It is essential that where family members are actively involved with the person being assessed, they are involved in the care assessment process.</p> <p>It is also important to consider the individual's capacity to make key decisions –</p> <ol style="list-style-type: none"> 1. If the person being assessed has capacity, then they have the right to determine who is involved in their care assessment. 2. If the individual being assessed is deemed not to have capacity, then key family members are invited to contribute to this process, in the person's best interest. 	Ongoing
5	The Minister for Social Security should ensure that all thresholds, disregards and benefit levels of the LTC Scheme are regularly updated and adjusted consistently. Any proposed inconsistency should be subject to detailed consultation and justified by Ministers.	SS	Partially accepted by SS	<p>The LTC scheme is a ring-fenced scheme, and the cost of the benefits paid out must be met from the value of the contributions received. The cost of benefits is rising from year to year, and in order to maintain the viability of the LTC fund, it is anticipated that a 0.5% increase in contribution rates will be required from 2020. Legislation to this effect will be need to be brought to the States Assembly for approval. At that time, the Minister for Social Security will set out an outline of the proposed treatment of benefit levels and thresholds over the period covered by the new Medium Term Financial Plan (2020 – 2023).</p> <p>It should also be noted that it is a key feature of the scheme that the Minister maintains control of the thresholds, disregards and benefit levels, and is able to adjust these in order to maintain the overall sustainability of the scheme. These are the 'levers' referred to in section 6.1 of the expert report prepared by BWCI.</p> <p>The Minister for Social Security will also include information in her Annual</p>	Ongoing

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
				Report setting out the current levels and identifying any changes within the context of the overall health of the Fund.	
6	The Minister for Social Security should investigate ways of speeding up the process of applying for an LTC property loan.	SS	Partially accepted by SS	<p>The process of applying for an LTC property loan is straightforward.</p> <p>Following the normal processing of a claim, the additional time to process a property loan for a customer is made up of 3 working days for the SS to deliver the application to the Judicial Greffe and up to 10 working days for this to be returned.</p> <p>However, SS will continue to review all processes (see action 2) including the application process for an LTC property loan to ensure that administration is simple and effective across all parts of the scheme.</p>	Ongoing
7	The Imosphere Assessment tool should be independently evaluated and the results published before the end of 2018.	HSS	Accepted by HSS	See summary of review actions below.	–
8	All claimants should receive annual statements, including details of LTC benefit or support paid and (if applicable) their progress towards the care costs cap.	SS	Partially accepted by SS	<p>See action 3. The project to provide online services includes a customer facility to have online access to their own benefit information. This facility will be developed as part of the overall online services project, noting the comments in action 3 as to the size of this client group.</p> <p>In the short term, new customer information will be provided to explain more clearly the eligibility for the standard LTC benefit. In particular, this information will describe the operation of the “care costs cap” as a waiting-period made up of a fixed number of weeks, regardless of the actual care costs incurred by the individual. This will make it much easier for families to keep track of their progress towards the</p>	End of 2019

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
				<p>“care costs cap”.</p> <p>At present, SS provides claimants with an estimate of the time required to meet care costs before the standard benefit is payable. This is done at the start of the claim, and at any point during the claim when a change will have an impact on the timetable to reach standard benefit.</p>	
9	The Health and Social Services Department should ensure that there is a dedicated social worker for each client on the LTC Scheme. This would ensure a continuity of care across the board and ensure that strong working relationships can be formed with each client. This should be implemented by Q4 2018.	HSS	Partially agreed by HSS	<p>A named care co-ordinator is provided, who can be a social worker, specialist community nurse, or an allied health professional, when someone requires ongoing care and support from HSS.</p> <p>However, where the package of care is provided by an approved provider, responsibility for care is transferred to the provider.</p> <p>Whilst the individual continues to receive a care package, they remain on an open ‘review’ case list, with an expectation of a minimum standard of an annual review.</p>	Ongoing
10	Where care is being provided in a care home, the Health and Social Services Department should ensure that there is a permanent link of one social worker to ensure continuity. This should be implemented by Q4 2018.	HSS	Agreed by HSS	This will be considered as part of the C&SS service redesign across adult services, due to be completed by the end of 2018.	End of 2018
11	The Social Security Department and Health and Social Services Department should make it better known that people can access the LTC Scheme purely to receive an allowance to use for respite care. This should be undertaken in various ways but should include a full explanation on the options for respite care within the LTC	SS/ HSS	Agreed by SS and HSS	<p>The new general leaflet includes clear information on the support available in this area.</p> <p>Further leaflets and public information will be developed during the remainder of 2018.</p> <p>Individual clients and their families are provided with information on providing unpaid care and the respite support that can be provided as part of an overall care package. This is part of the overall care assessment process.</p>	June 2018

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
	General Information Leaflet, or by producing a standalone leaflet on respite care by Q3 2018.				
12	Both the Minister for Health and Social Services and Minister for Social Security should carry out a detailed review of respite provision and its funding. The review should include all aspects of Priority 1 within the Carers' Strategy 2017 ("Getting the right Respite"). The outcomes of the review should be reported back to the States before the end of 2018.	SS/ HSS		See summary of review actions below.	–
13	Since the introduction of the LTC Scheme a new market in care provision has been created. The Social Security Department should monitor the charges made by care homes and report to the States on an annual basis.	SS	Will be achieved by CM through legislation	<p>The LTC scheme is designed to work within an open care market. Providers include parishes, charities and commercial organisations.</p> <p>Under the new RoC Law there will be a legal requirement under Regulation 26 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations (<i>not yet lodged for debate</i>) for all care services (other than a directly employed carer) to publish a scale of charges.</p> <p>The Standards and Requirements Regulations are due to be operational towards the end of 2018. They will include the following Regulation –</p> <p>26. Charges</p> <p>(1) A registered person must publish the scale of charges for the regulated activity, including any additional charges not covered by its standard charge.</p> <p>(2) Paragraph (1) does not apply to a regulated activity operated by a registered person who is an</p>	End of 2018

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
				<p>individual directly employed by, or personally in receipt of any reward from, the care receiver for the care provided.</p> <p>(3) However, that individual must when requested to do so by the Commission provide the Commission with information about the charges made to care receivers.</p>	
14	The Social Security Department and Health and Social Services Department should consult with adults with long-term conditions, their carers and the Voluntary and Community Sector which supports them. The purpose would be to better assess the needs of young adults and the ways of meeting those needs. The Department should report back to the States with its findings before the end of 2018.	SS	–	See summary of review actions below.	–
15	The Social Security Department should monitor the situation with Les Amis in terms of the deflator added for group homes and engage with the organisation recognising the importance of the service they provide.	SS	Accepted by HSS	<p>The deflator does not form part of the LTC scheme. It is used by HSS in respect of clients who are receiving additional support above the maximum level of the LTC benefit.</p> <p>HSS will continue to work closely with Les Amis.</p>	Ongoing
16	In pursuing a policy presumption that it is preferable to provide care in people's own homes, the Minister for Health and Social Services should ensure there is awareness of the risks of	HSS	Accepted by HSS and SS	The risk of isolation is inherently understood across services that respond to older people, and both SS and HSS acknowledge the policy challenges faced by the ageing population and the need for fully co-ordinated "living longer" policies.	Ongoing

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
	depression and isolation amongst older people. Ways to counteract this should be included within policy.			To be effective, active steps need to be taken across all areas of government activity, including housing, transport and lifelong learning. SS and HSS will work with other Ministers to support a coherent policy to address these issues.	
17	Statistical information about the proportion of claimants in each care level and the transitions between levels should be monitored and published as part of the Minister for Social Security's Annual Report.	SS	Accepted by SS	The timing of the scrutiny review coincided with a transfer of data from one IT system to a new system within SS. This created practical difficulties in providing information to the Panel. In future years this information will be available.	Ongoing
18	The Social Security Department should ensure that information about the assets of those entering care is recorded, so that any trends in the amount of these assets can be monitored. This information could be of assistance in any future modelling of the LTC Scheme. The appropriate processes should be put in place by Q3 2018.	SS	Accepted by SS	The timing of the Scrutiny Review coincided with a transfer of data from one IT system to a new system within SS. This created practical difficulties in providing information to the Panel. This information is now being recorded.	Ongoing
19	Any anticipated changes in care needs over time, as result of medical advances, should be factored into the model to project the LTC Scheme's financial sustainability.	SS	Accepted by SS	An actuarial review of the LTC Fund is currently underway, and this will take account of possible trends in health care in the future.	Ongoing
20	The Panel's adviser notes that in the UK there has been a marked growth of dementia deaths. The incidence of dementia in Jersey and the recording of causes of death should be researched further in	SS	Accepted by CM	The UK Office of National Statistics is responsible for collating information on the causes of death in Jersey, and applies the same methodology as is used in the UK. Current processes will be reviewed to ensure that mortality data is robust.	September 2018

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
	the interests of statistical accuracy and future modelling. The outcome should be reported to the Panel by Q3 2018.				
21	As recommended by the Panel's adviser, BWCI, the actuarial review of the LTC Fund being conducted in 2018 should include an analysis of actual experience to date. The Social Security Department should use this as the starting point for determining realistic assumptions for the future financial modelling of the LTC Scheme.	SS	Accepted by SS	An actuarial review of the LTC Fund is currently underway. The review will be completed during 2018. The review will include an analysis of actual experience and provide a range of modelling scenarios.	Q4 2018
22	The practice of progressively reducing the amount of LTC benefit or support paid whilst a claimant is in hospital should be reviewed as it seems unfair that the claimant should have to make up any balance owed to his/her care home for the period spent in hospital.	SS	Accepted by SS	The LTC scheme currently provides ongoing support to a claimant who need inpatient hospital treatment for up to 6 weeks. Most hospital stays are much shorter than 6 weeks, and a long stay in hospital is often associated with increased care needs, which might mean that the previous care arrangements cannot be returned to at the end of the hospital stay. The Social Security Department is currently reviewing this area of LTC legislation in respect of both claimants receiving care in a care home and in their own home.	End of 2018
23	The LTC Scheme should cover short-term costs incurred when a period of more intensive care is needed for a claimant living at home. This can arise if a final period of palliative care is needed to allow a patient to pass away in his or her own home.	SS	Accepted by SS and HSS	Both Departments can now act promptly to support a claimant requiring palliative care. A care assessment review can be completed within one working day where that priority is identified. The benefit application process is adapted to support claimants in this situation.	Ongoing

	Recommendations	To	Accept/ Reject	Comments	Target date of action/ completion
24	The LTC Scheme should acknowledge that many claimants spend considerable amounts adapting their accommodation to meet their care needs, e.g. fitting stair-lifts, installing accessible washing facilities, purchasing adjustable beds. It is suggested that such capital expenditure should be regarded as part of relevant expenditure to reach the care costs cap.	SS	Rejected by SS	<p>The final 2 recommendations relate to the way in which costs are accrued towards the care costs cap.</p> <p>As noted in action 1, the new customer information will explain this concept in terms of a number of weeks, rather than an amount of money. For a given care level, the care costs cap will always be reached after the same period. During this time, some claimants will have spent more on their overall care package – this is often the case where a claimant decides to receive care in their choice of care home.</p> <p>However, for many claimants receiving care in their own home, the actual cost of their care package will be well below the standard care rate associated with their care level.</p> <p>Accruing costs in this way is generally to the advantage of the claimant who is receiving care at home, and the scheme was designed to encourage people to remain at home where possible.</p> <p>Extending the rules of the scheme to make special provision for capital expenses or the living costs of live-in carers would add additional complexity to the scheme. This will not be pursued in the short term.</p> <p>It should be noted that support is available for the cost of equipment through existing schemes. For larger items and structural projects, the home adaptation scheme provides means-tested support to homeowners and private sector tenants. Andium holds a separate budget for adaptations to their properties. Smaller items of equipment are available through the HSS occupational therapy service.</p>	–
25	The LTC Scheme should also acknowledge that claimants receiving live-in care in their own homes have additional expense in providing food, heat, power, and transport and so on for their carer. It is suggested that an allowance should be made so that these expenses are regarded as part of relevant expenditure to reach the care costs cap.				

CONCLUSION

There are 3 recommendations which call for a review –

7	The Imosphere Assessment tool should be independently evaluated and the results published before the end of 2018.
12	Both the Minister for Health and Social Services and Minister for Social Security should carry out a detailed review of respite provision and its funding. The review should include all aspects of Priority 1 within the Carers' Strategy 2017 ("Getting the right Respite"). The outcomes of the review should be reported back to the States before the end of 2018.
14	The Social Security Department and Health and Social Services Department should consult with adults with long-term conditions, their carers and the Voluntary and Community Sector which supports them. The purpose would be to better assess the needs of young adults and the ways of meeting those needs. The Department should report back to the States with its findings before the end of 2018.

To ensure that reviews are well-targeted and resources co-ordinated efficiently, the responses to these recommendations have been considered together, and take into account other work that is already underway. The following actions will be undertaken.

1. **Care Assessments:** The Health and Social Services Department has recently commissioned an independent review of the assessment system for Long-Term Care and its suitability to meet the needs of adults with a learning disability.

The work consists of a comprehensive review of –

- The current process for assessment (the Imosphere assessment tool) and determining eligibility, the documentation used and whether it is fit for purpose, and how this process is implemented in practice. This will include a consideration of whether the current system is appropriate for meeting the needs of adults with learning disabilities.
- The current process for conversion of the needs assessment into a care plan and access to an indicative budget suitable to meet the needs of adults with a learning disability.

In addition, this review will also include an assessment of –

- The business model, finance model and model of care for the charity Les Amis.
- Respite and funding.

This review is underway and will be complete by the end of 2018.

2. **Carers' legislation:** A cross-departmental group has been set up to consider the need to introduce carers' legislation in response to the Carers' Strategy published last year by the Jersey Association of Carers Inc. The findings from this review will (as necessary) be included in the Medium Term Financial Plan for 2020 – 2023.

3. **Support for ancillary costs associated with domiciliary care packages:** The departments are working together to identify a consistent method for acknowledging the additional costs faced by some households where care is being provided at home (e.g. additional energy costs). Implementation will require legislation and funding. A proposal will be prepared for consideration by the Council of Ministers before the end of 2018.